COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:
This declaration is of the following type:
 original design supplemental national stage of PCT divisional continuation continuation-in-part (CIP)
My residence, post office address and citizenship are as stated next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or ar original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed for and for which a patent is sought on the invention entitled: DEVICES FOR ADJUSTING CONTACT PRESSURE EXERTED ON AN ADJACENT ROTATING BODY BY A ROLLER IN A ROLLER STRIP AND/OR FOR ARRANGING THE ROLLER ON THE ROTATIONAL BODY AND/OR FOR DISCONNECTING THE CYLINDER FROM THE ROTATING BODY
the specification of which:
[] is attached hereto
[] was filed on as
Application Serial No.
and was amended on (If applicable)
[X] was described and claimed in PCT International application
No. PCT/EP2005/050359 filed on January 28, 2005
and as amended under PCT Article 19 on July 11, 2005 (if any).
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any Amendment referred to above.
I acknowledge duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.
[X] In compliance with this duty there is attached an information disclosure statement. 37 CFR § 1.97.

foreign application(s) for patent or	inventor's certific patent of inventor	35, United States Code, § 119, of any ate listed below and have also identified as certificate having a filing date before		
[] no such applications have [X] such applications have been		:		
Prior Foreign Application(s)				
	rmany ountry) (D	30/1/2004 ay/month/year filed)		
I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States Provisional application(s) listed below:				
(Application Number)	(Filing D	ate)		
(Application Number)	(Filing D	ate)		
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose all information known to Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:				
(Application No.)	Filing Date	(Patented, pending, abandoned)		
(Application No.)	Filing Date	(Patented, pending, abandoned)		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

George M. Cooper, Reg. No. 20,201 William A. Blake, Reg. No. 30,548 Colin D. Barnitz, Reg. No. 35,061 Douglas R. Hanscom, Reg. No. 26,600 Jennifer P. Yancy, Reg. No. 47,003 Alexander D. Raring, Reg. No. 52,502

Send correspondence and direct telephone calls to:

Douglas R. Hanscom JONES, TULLAR & COOPER, P.C. P.O. Box 2266, Eads Station Arlington, Virginia 22202 (703) 415-1500

I hereby declare all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Bernd Klaus FAIST	
Inventor's signature Dernd Klaus Faus	Jun 1th, 2006
Residence Roßhirtstr. 2, 97199 Ochsenfurt, Germany	V (Date)
Citizenship <u>German</u>	
Post Office Address(Same as above)	